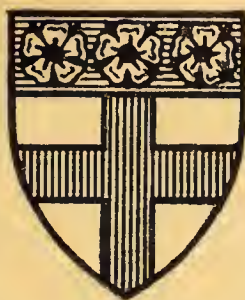


AC. 4468

NORTH RIDING OF YORKSHIRE COUNTY COUNCIL

EDUCATION COMMITTEE



ANNUAL REPORT

OF THE

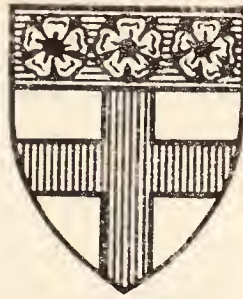
PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE YEAR

1965

NORTH RIDING OF YORKSHIRE COUNTY COUNCIL

EDUCATION COMMITTEE




ANNUAL REPORT

OF THE

PRINCIPAL SCHOOL MEDICAL OFFICER

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INTRODUCTION

Mr. Chairman, My Lord, Ladies and Gentlemen,

I have pleasure in submitting my Report on the School Health Service in the administrative North Riding.

The Report gives the facts about various branches and activities of the School Health Service, either in the text or in the ensuing statistical material. It shows that the health generally of school children in the Riding in 1965 was good; it also shows, however, that the number of children needing the medical, dental and other health services provided by the Education Authority is still considerable and that specialist services of this nature will be needed for very many years to come, from one source or another.

A most promising advance during the year under review was the decision by the County Council to promote a great increase in health education in the County by the appointment of a team specifically for the purpose. It is hoped that the schools of the Riding will make full use of this new service which should help significantly to improve the health of future generations.

I should like to thank my deputy, Dr. A. W. McIntosh, who drafted this report, and my staff who prepared the material in it. I wish also to acknowledge my indebtedness to Head Teachers of the schools in the Riding and to my colleagues in the Education Department.

J. T. A. GEORGE,

Principal School Medical Officer.

February, 1967.

GENERAL STATISTICS

The Education Committee is responsible for primary and secondary education throughout the administrative county but certain functions relating to primary and secondary education are exercised by the Scarborough Divisional Executive in the area of that division which consists of the municipal borough of Scarborough, the urban district of Scalby, and the rural district of Scarborough. Subject to the general direction of the Committee, the school health service in the Scarborough division is administered by the divisional executive.

Population in the administrative county (mid-year 1965)	....	423,900
Children on registers of primary and nursery schools, January, 1966	....	40,858
Children on registers of secondary schools, January, 1966	....	23,757
Children on registers of special schools, January, 1966	....	434
	Total	65,049
Primary schools or departments, January, 1966	....	310
Secondary schools, January, 1966	....	57
	Total	367

SCHOOL HEALTH SERVICE STAFF at 31-12-1965

MEDICAL

Principal School Medical Officer

*J. T. A. GEORGE, M.D., CH.B., D.P.H.

Deputy Principal School Medical Officer

*A. W. McINTOSH, M.D., CH.B., D.P.H. (commenced 4.1.65).

Medical Officer of Health and Divisional School Medical Officer

*W. G. EVANS, M.A., M.B., B.CHIR., D.P.H.

School Medical Officers

*ELIZABETH R. CAMERON, M.B., CH.B., D.P.H.

ELIZABETH D. ELLISON, B.A., M.B., CH.B.
(part-time)

*C. P. ALLEN, F.R.C.S., M.B., CH.M., D.T.M., D.P.H.

*T. P. BINNS, M.R.C.S., L.R.C.P., D.P.H.

*KATHLEEN S. BIRD, M.B., B.S.

DOROTHY A. EGGLETON, M.B., CH.B. (part-time, commenced 30.12.65)

Scarborough
Divisional
Executive

JOY M. GARDINER, M.B., B.S., D.OBST., R.C.O.G. (part-time, resigned 31.12.65).

*J. A. GOWANS, L.R.C.P., L.R.C.S.

*NOEL HAY, M.B., B.CH., B.A.O.

BARBARA RICHARDSON, M.B., CH.B. (part-time).

*SHEILA SHERRINGTON, M.B., B.S.

*MAVIS B. TAYLOR, M.R.C.S., L.R.C.P.

*P. S. R. BURRELL, M.B., CH.B., D.P.H.

*W. R. M. COUPER, M.B., CH.B., D.P.H.

*H. DIGGLES, M.B., CH.B., D.P.H.

*A. ELSWORTH, M.B., B.S., D.P.H.

*A. H. GOLLEDGE, M.R.C.S., L.R.C.P., D.P.H.
(resigned 31.3.65).

*H. GRAY, M.D., CH.B., D.P.H.

*H. R. MORRISON, M.B., CH.B., D.P.H.

*T. M. B. ROHAN, M.B., CH.B., B.A.O., D.P.H.

*B. SCHROEDER, M.B., CH.B., D.P.H.

*W. S. SLATER, M.B., CH.B. D.P.H.
(commenced 19.7.65).

Also District
Medical Officers
of Health, and
Assistant County
Medical Officers

*Approved by the Ministry of Education for the ascertainment of educationally sub-normal children.

Part-time Specialist Officers

Aural Surgeon F. FLEMING, M.B., B.S., D.L.O.

Psychiatrist L. W. ROBINSON, M.B., CH.B., D.P.M.

Anaesthetists (Dental services)

R. D. BELL, M.B., CH.B. (full-time).

R. M. MACKENZIE, M.B., B.S.

R. W. RUTTER, M.B., CH.B.

In addition the Regional Hospital Boards at Newcastle and Leeds provide the part-time services of ophthalmic surgeons, orthopaedic surgeons, and aural surgeons, and in the case of the Leeds Board one part-time psychiatrist without charge to the Authority.

DENTAL

Principal School Dental Officer

I. J. FAULDS, L.D.S.

School Dental Officers

MRS. J. A. ARTHUR, B.D.S. (part-time, commenced 5.10.65).

I. F. ASH, B.CH.D., L.D.S. (commenced 5.7.65).

D. BEWES-ATKINSON, L.D.S. (part-time)

MRS. D. CARTER, L.D.S. (part-time).

H. R. CARTER, B.D.S.

A. D. CLARK, L.D.S.

A. M. DOWNES, L.D.S., B.D.S. (part-time, commenced 8.9.65).
G. FLEMING, L.D.S. (part-time).
MISS V. B. JENKINSON, B.D.S. (resigned 31.5.65).
R. McDEARMID, B.D.S. (resigned 30.9.65).
H. C. MORGAN, L.D.S. (part-time).
J. I. MUNRO, L.D.S. (part-time, resigned 2.7.65).
B. MYERS, L.D.S. (part-time).
MISS R. C. NESBITT, L.D.S., B.D.S.
C. E. PLACE, L.D.S.
MISS M. ROSE, B.D.S. (commenced 1.9.65).
R. G. SAVAGE, B.D.S. (commenced 1.1.65, resigned 30.9.65).
MRS. S. R. SEAMAN, L.D.S., B.D.S.
MISS J. H. SUTTIE, L.D.S.
MRS. G. WIGIN, L.D.S. (part-time, commenced 8.2.65).

Dental Auxiliaries

MISS J. M. JENKINSON
MRS. D. MATTHEWS.

Dental Technicians

R. G. HANSOM, Dental Technician-in-charge.
B. HARRIS, Dental Technician.
F. C. STRAW, Dental Technician.
S. WILLIAMSON, Apprentice Dental Technician (commenced 1.9.65).

Dental Attendants—13 full time, 5 part time.

NURSING

Area Nursing Officers

MISS K. A. DAWSON, S.R.N., S.C.M., H.V.CERT.
MISS J. SCOTT, S.R.N., S.C.M., R.F.N., H.V.CERT.

School Nurses

48 Health Visitor/School Nurses.
4 Health Visitor/School Nurses (part-time).
3 School Nurses.

A school nursing service equivalent to that of a further 3 full-time nurses is given by district nurses or combined-duty nurses in the rural areas.

Orthopaedic Nurses

MISS C. CHAPMAN, S.R.N.
MISS B. D. ROWELL, S.R.N., S.C.M., Orthop. Certif.

Audiometric Nurse

MRS. H. WALKER, S.R.N.

CHILD GUIDANCE

Educational Psychologists

MISS E. M. MILBANKE, M.A.

D. D. WOODWARD, B.A.

Psychiatric Social Worker

F. N. RIGG, A.A.P.S.W., R.M.N. (part-time, resigned 31.8.65).

Social Workers

MISS A. E. HEY, SOC. SC. CERT.

MRS. H. D. TREES, I.M.I.A. (part-time).

SPEECH THERAPY

MRS. M. AITCHISON, L.C.S.T. (part-time, commenced 1.11.65).

MRS. A. I. HANKEY, L.C.S.T. (part-time).

MISS P. A. MACKIE, L.C.S.T. (resigned 13.10.65).

MISS E. M. TAYLOR, L.C.S.T.

MRS. J. C. GROVER, L.C.S.T. (commenced 27.9.65).

ADMINISTRATIVE STAFF

H. A. ROEBUCK, D.P.A.

B. M. MATHISON

STAFF

Few changes in medical staffing occurred during the year.

At Eston, Dr. W. S. Slater succeeded Dr. A. H. Golledge who resigned in March to take up the appointment of Medical Officer of Health for Harwich.

Just before the year's end Dr. Dorothy A. Eggleton succeeded Dr. Joy Gardiner.

In the dental field the resignations of Miss Jenkinson, Messrs. McDearmid, Savage and Munro were offset by the appointment to full-time duty of Mr. Ash (Scarborough) and Miss Rose (Richmond). Mrs. Arthur, Mr. Downes and Mrs. Wigin joined the staff as part-time officers. Mr. S. Williamson commenced training as an apprentice dental technician.

The child guidance service was further depleted in August by the departure of Mr. Rigg, part-time psychiatric social worker, to a hospital post. Miss A. E. Hey was seconded as a student sponsored by the Authority to a psychiatric social workers' course at Manchester University.

Severe staffing problems still beset the speech therapy service. Miss Mackie resigned in October but was replaced by Mrs. Grover and Mrs. Aitchison undertook part-time duties from November. The position still remains critical as in some areas only the most urgent and severe cases can be seen. This is very far from the provision of a full service and is discouraging to the teachers, health visitors and others who are constantly watchful for speech defects.

MEDICAL INSPECTION OF PUPILS

Regular medical inspection by the school health service staff was carried out in 218 primary and 51 secondary schools and also in the special schools in the Riding. The Education Committee's staff did not inspect those children in the three hospital schools which have been the educational responsibility of the Committee since 5th July, 1948. Periodic medical inspection was performed on 22,134 school children, 655 fewer than in 1964.

DISEASES AND DEFECTS

3,059 of the 22,094 children inspected were suffering from a condition (other than dental diseases or vermin infestation) which was deemed to require treatment. This proportion of children (13.8%) does not differ significantly from the 13.9% who were similarly recorded in 1964.

The following table shows the numbers and proportions of children requiring treatment analysed according to year of birth.

Age Groups Inspected (by year of birth)	Number of Pupils	
	Inspected	Found to require treatment (excluding dental diseases and infestation with vermin)
1961 and later	90	13 (15.44%)
1960	1,929	284 (14.72%)
1959	3,445	379 (11.00%)
1958	1,533	163 (10.63%)
1957	2,246	273 (12.15%)
1956	1,537	165 (10.74%)
1955	904	136 (15.04%)
1954	1,818	274 (15.07%)
1953	2,423	361 (14.90%)
1952	1,267	217 (17.13%)
1951	1,370	220 (16.06%)
1950 and earlier	3,572	574 (16.07%)
Total	22,134	3,059 (13.82%)

Further details are given in Part I, Table A and Part II, Table A.

Special Inspections and Re-inspections

Special inspections and re-inspections showed an increase of 518 compared with 1964; the totals were 14,635 and 14,117 respectively. These examinations constitute a vital part of the service as routine examinations at fixed intervals are of limited use if no surveillance follows. Teachers, parents and school nurses suspecting abnormalities must have free access to the advice of the school medical officers so that early treatment or advice can be given.

General Physical Condition

The following table records the proportions of school children medically inspected whose general condition and state of nutrition was considered to be “satisfactory” or “unsatisfactory”.

Year	Number of Pupils Inspected	Satisfactory	Unsatisfactory
1956	20,341	99.19	.81
1957	26,202	99.56	.44
1958	21,309	99.45	.55
1959	24,108	99.54	.46
1960	23,621	99.48	.52
1961	22,560	99.64	.36
1962	22,553	99.74	.26
1963	24,172	99.59	.41
1964	22,789	99.83	.17
1965	22,134	99.82	.18

The very small variations occurring from year to year are of little or no significance and the general state of pupils’ nutrition is regarded as satisfactory.

CLEANLINESS

School nurses carry out cleanliness inspections as routine practice. In 1965, 133,741 examinations were performed, 7,376 fewer than in 1964. Cases of pupils harbouring lice, nits or both numbered 1,801, an increase of 48 compared with 1964. The rate on infestation, however, shows a minor decrease and was less than 3%.

The number of schools where no children with lice or nits were found continued to rise: 238 in 1965 compared with 201, 210, 195 and 221 in 1961, 1962, 1963 and 1964 respectively.

The number of schools where more than 20% of pupils were infested is now very small. Only 4 were found within this category compared with 11, 8, 7 and 6 in the years 1961-1964 respectively.

The improvement in the control of infestation is further shown by the issue of only 5 cleansing notices to parents. In 1961, 1962, 1963 and 1964, notices issued numbered 26, 32, 7 and 24 respectively.

Over the years the decline of verminous conditions in school children has been achieved, not only by better social standards and effective re-education in personal hygiene, but also by painstaking inspection and careful, diligent follow-up by the school nurses. When an outbreak occurs due to the presence of infested individuals, other children from previously uninfested families are usually involved to the distress of both children and parents. Unfortunately, complete eradication is usually not achieved as all the personal and family contacts cannot be traced and treated. Nevertheless there are now fewer apathetic parents and many of the more persistent offenders are becoming amenable to treatment.

Incidence of Verminous Conditions in Schools, 1965

Percentage of Children Infested			No. of Schools
Nil	....	....	238
Under 1%		....	19
1—1.99	....	....	23
2—2.99	....	....	15
3—3.99	....	....	11
4—4.99	....	....	3
5—9.99	....	....	35
10—20	....	....	19
Over 20%	....	....	4

CLOTHING AND FOOTWEAR

Cases of inadequate clothing are now rare and school medical officers report that the provision of new, modern school buildings seems to be associated with improvements in dress and turnout. The wearing of pointed and other unsuitable forms of “fashion” footwear may lead to deformity of the feet and the subsequent need for chiropody or orthopaedic treatment.

Following-up

This is a vital bridge between home, school and the general practitioner. The health visitor has visited the home regularly during the child’s pre-school life and is known to the parents, teaching staff and family doctor. Her visits are therefore complementary to examination and treatment.

In 1965, 4,248 visits were made compared with 3,793 in 1964.

TREATMENT OF DEFECTS

New Premises

During the year a new purpose-built clinic and Area Health Office was opened at Scarborough; it contains accommodation for county Health clinics and staff as well as the staff of Scarborough Corporation Health Department. Included in the building is a child guidance suite, remedial exercise room and consulting and waiting areas for specialist and minor ailment clinics. A dental unit is provided on the ground floor. The new clinic, which has been well received by staff and users, has the considerable advantage of housing all the clinic services under one roof in contrast to the former fragmentation in separate and unsatisfactory premises.

Minor Ailments

School clinic sessions were held daily at Pickering and Scarborough, three times weekly at Whitby, Grangetown, twice weekly at Redcar, Thornaby, South Bank, New Earswick and Clifton Without and once weekly at Lingdale, Guisborough, Brotton, Eston and Saltburn, and fortnightly at Loftus. As well as being used for the supervision and treatment of relatively trivial conditions, the clinics provide suitable centres at

which the school medical officers are available for consultation by parents or teachers. Examinations of various kinds are also carried out in clinics which are an important part of the school health service: more and more of the time of the staff at these clinics is given to assessment of handicaps and other special examinations.

The conditions for which the children attended, and the number of visits and re-visits made were as follows:—

Attendances at Minor Ailment Clinics

Condition for which children attended the School Clinic	Number of first visits	Number of re-visits
Scabies	1	—
Impetigo	3	22
Ringworm—Head	1	—
Ringworm—Body	—	—
Verminous conditions	140	117
Minor injuries	204	53
External Eye Disease	28	6
Ear Discharge and deafness	14	6
Nose and throat disease	4	1
Vision	126	103
Skin	363	1,569
Orthopaedic defects	14	1
Sores	105	29
Heart and circulation defects	1	—
Speech defect	—	—
Other conditions	59	56
Special examinations	2	—
Total	1,065	1,963

The table above shows a further satisfactory fall in attendances at Minor Ailment Clinics. Statistics of the number of children attending hospitals or general practitioners for minor ailments are not available.

Year	Number of First Visits	Number of Re-visits	Total number of Attendances
1955	6,949	6,958	13,907
1956	5,299	5,468	10,767
1957	4,947	3,994	8,941
1958	4,229	2,852	7,081
1959	3,764	2,456	6,220
1960	3,058	1,854	4,912
1961	3,166	2,377	5,543
1962	2,596	3,777	6,373
1963	1,891	2,626	4,517
1964	1,581	2,107	3,688
1965	1,065	1,963	3,028

Diseases of the Ear, Nose and Throat

Regular surveys of school children in the Riding have been carried out by an audiometric nurse, employed solely on this work, for many years. This valuable case-finding and preventive measure was continued in 1965 when some 10,353 individual tests were made, as compared with 12,057 in 1964. The tests are performed with the puretone audiometer, an instrument which permits an accurate assessment of the degree of hearing loss at different sound frequencies. A total of 224 children failed the test, but many of these were found to have a hearing loss of a temporary nature only, due to impacted wax or some other easily rectifiable cause. Children having more permanent hearing loss were referred, in collaboration with the family doctor, for specialist advice. Consultants in Darlington, Scarborough and York have co-operated in this way. In the Tees-side area children with impaired hearing were seen by Dr. Fleming at one of the clinics mentioned on page 44; those requiring admission to hospital or more detailed examination as out-patients, were referred by him to the North Riding Infirmary.

The total number of attendances at Dr. Fleming's clinics was 274 by 231 children of whom 138 were new cases. The disposal of the 138 new cases was as follows:—

Dr. Fleming — New Cases

Disposal		Source		
		Group test failures	Referred by Medical Officers	Both sources
Referred for Treatment	to hospital	47	8	55
	to minor ailment clinic	36	13	49
Attending own doctor		4	4	8
Not requiring treatment		9	15	24
Fitted with hearing aids		2	—	2
Total		98	40	138

In contrast to the diminishing numbers of previous years 341 children required operative treatment for unhealthy tonsils and/or adenoids. Corresponding figures for 1964, 1963, 1962 and 1961 were 168, 181, 251 and 302. Forty-eight children were referred for operative treatment of other conditions of the ear, nose and throat compared with 12 in 1964 and 28 in 1963. Conservative treatment was given at school clinics to 258 children (389 in 1964: 242 in 1963).

Visual Defects and Diseases of the Eye

Children suspected of having defective eyesight or a squint were again referred in substantial numbers, 3,034 in 1965, to consultant ophthalmologists holding sessions in the Authority's clinics. These sessions were, as previously, organised and administered by the school health service but the specialists were paid by the regional hospital boards. Spectacles were prescribed for more than two-thirds of the children examined at the sessions including those who attended on account of squint.

The numbers of children seen by school medical officers in the past ten years with a suspected defect of vision have been as follows:—

Year	School population	Requiring treatment for vision	Requiring observation only	Total
1956	55,403	1,093	1,160	2,253
1957	55,838	1,558	1,935	3,493
1958	57,439	1,153	1,712	2,865
1959	58,116	1,836	2,607	4,443
1960	58,706	1,294	1,935	3,229
1961	59,557	1,437	1,803	3,240
1962	59,740	2,274	1,216	3,490
1963	61,373	2,625	1,675	4,300
1964	62,911	2,802	1,249	4,051
1965	65,049	2,584	1,825	4,409

The number of children found to have unsatisfactory vision therefore diminished.

The table below gives the figures for squint during the past ten years. The number of children requiring treatment in 1965 (455) represents a slight increase.

Year	School population	Requiring treatment for squint	Requiring observation only	Total
1956	55,403	155	159	314
1957	55,838	150	164	314
1958	57,439	143	169	312
1959	58,116	164	171	335
1960	58,706	156	223	379
1961	59,557	184	200	384
1962	59,740	323	111	434
1963	61,373	422	154	576
1964	62,911	443	105	548
1965	65,049	455	102	557

DISEASES OF THE SKIN

The table below refers to children treated within the school health service and not those attending hospitals and general practitioners.

The very low number of sufferers from scabies, ringworm and impetigo is nevertheless very encouraging.

Diseases

Year	Unspecified Lesions	Scabies	Ringworm	Impetigo
1965	468	1	1	3
1964	716	6	2	9
1963	794	24	5	18
1962	1,118	13	4	22

ORTHOPAEDIC DEFECTS

Orthopaedic clinics were held regularly in the following places:—

Guisborough	Pickering	South Bank
Kirkbymoorside	Redcar	Thirsk
Loftus	Richmond	Thornaby
Malton	Saltburn	Whitby
Normanby	Scarborough	York (rented from the York Education Committee)
Northallerton		

During 1965, 251 sessions were held and 1,185 children made 2,726 attendances. An orthopaedic surgeon attended at 142 (125 in 1964) clinics and the remainder of the sessions were conducted by one or other of the two orthopaedic nurses employed by the Committee.

Cases treated in the Authority's clinics do not represent the total number of orthopaedic cases in the county. Many are treated in hospital as in-patients and out-patients. Little information is sent to school medical officers about the children so treated, except in the case of the Adela Shaw Orthopaedic Hospital, Kirkbymoorside. The following table gives information about children treated in 1965 as in-patients at this specialist hospital.

Condition	No. of Children treated	Condition	No. of Children treated
Deformity of feet	43	Muscular Dystrophy	1
Deformity of leg	6	Osteomyelitis	1
Deformity of hand	1	Asthma	4
Deformity of arm	5	Posture	3
Cerebral Palsy	2	Microphely	1
Hemiplegia	5	Ganglion	2
Paraplegia	5	Heart disease	3
Infantile paralysis	6	Enuresis	6
Torticollis	2	Faecal incontinence	1
Congenital dislocation of the hip	6	Prepatellar Haemangioma	1
Old fractures and injuries	1	Other conditions	6

SPEECH THERAPY

Despite the low level of staffing and disturbance due to staff changes, there was a slight increase in the numbers treated.

It must be emphasised that lack of early and effective treatment can permit a remediable defect to become a severe physical, social and psychological handicap. This is especially relevant in the field of special education where a child’s latent talents must be developed to the full and where treatment may be most time consuming. The presence of a severe speech disorder may tip the balance in later life between self-sufficiency and dependence upon the community and therefore early detection and treatment is vital.

The factual data for the Riding are as follows:—

Total number of treatments	....	....	4,103
Interviews with parents	....	....	487
Cases under treatment at beginning of the year			292
Number of cases admitted	....	....	245
Cases discharged and withdrawn		....	214
Cases remaining under treatment		....	323

The reasons for cessation of treatment are as follows:—

		Boys	Girls	Total
Discharged adjusted	}	107	61	168
Discharged conditionally				
Left district	....	6	5	11
Left school	....	11	8	19
Poor attendance	....	5	2	7
Attending elsewhere	....	2	—	2
Refused treatment	....	2	2	4
Treatment not advised	....	2	—	2
Referred for investigation	....	—	1	1
		135	79	214
Remaining under treatment	....	212	111	323
		347	190	537

The defects from which these children suffered are given in the following table:—

			Boys	Girls	Total
Stammer	....	....	68	22	90
Dyslalia	....	....	213	130	343
Dyslalia and Stammer	....		5	—	5
Dyslalia and Dysphonia	....		—	2	2
Cleft Palate	....	....	8	7	15
Partial Deafness	....	....	8	2	10
Dysphonia	....	....	1	4	5
Delayed speech	....	....	11	8	19
Rhinolalia	....	....	1	—	1
Sigmatism	....	....	5	6	11
Retardation	....	....	4	—	4
Dysarthria	....	....	4	1	5
No defect on examination	....		8	4	12
Dysphasia	....	....	4	1	5
Dyslalia and Dysphasia	....		1	3	4
Other conditions	....	....	6	—	6
			<hr/>	<hr/>	<hr/>
			347	190	537
			<hr/>	<hr/>	<hr/>

THE CHILD GUIDANCE SERVICE REPORT FOR 1965

Report by Miss Milbanke and Mr. Woodward, Educational Psychologists

At the time of writing, the Service has expanded, but in 1965 there were few changes and no new appointments. Dr. L. W. Robinson continued to hold seven psychiatric sessions a week in the northern area of the county, Dr. B. Richardson's sessions in Scarborough were increased to three a week, and Dr. C. H. Neville-Smith held one session a fortnight at York.

Of the full-time staff, the Educational Psychologists, Miss E. M. Milbanke and Mr. D. D. Woodward, were based on Northallerton and Scarborough respectively, while the third post based on Redcar remained vacant. Mr. F. N. Rigg, Psychiatric Social Worker, was responsible for the western half of the county from Richmond to York. Miss A. E. Hey was the Social Worker at Thornaby, Guisborough, Whitby and Scarborough until October when she was seconded for a year to Manchester University to take the course which leads to the qualification of Psychiatric Social Worker. In September, Mr. Rigg left to take up a hospital appointment, but happily he returned a few months later. At the end of the year, Mrs. H. Trees, who worked a very full "half-time", was the only social worker in the County Child Guidance Clinics.

Scope of Work

Altogether 329 cases were referred this year: 63 by school medical officers, 32 by family doctors, 21 by hospitals and 4 by other child guidance clinics; 130 by head teachers, 27 by the Children's Officer, 21 by parents directly, 10 by the Chief Education Officer, 8 by magistrates and probation officers, 6 by health visitors, 5 by speech therapists, one by the Youth Employment Service and one by the Army Education Service. Eight reports were prepared for the juvenile courts.

Of these newly registered cases, 185 were suffering from some form of nervous or behaviour disorder that called for investigation at the clinic, while the remainder presented as educational problems.

Clinics

Three psychiatric sessions a week were held at Scarborough, two at Redcar and Richmond, and one a week at Guisborough, Thornaby and Whitby. Once a fortnight a session was held at the premises of the York City Guild Guidance Clinic. The absence of a clinic at Northallerton still constituted the biggest gap in the county provision.

The Scarborough Clinic premises were transferred to a suite in the new Area Health Office, Northway. Elsewhere rooms in local health offices were shared with other services, a situation which promotes communication with other branches of the School Health Service, but which also demands forbearance all round. At 29 Queen Street, Redcar, the advantage of having rooms used exclusively by the Child Guidance Service was appreciated.

Children seen by Psychiatrist

Clinic	Consultation only		Treatment		Total
	Boys	Girls	Boys	Girls	
Guisborough	7	1	6	4	18
Redcar	16	3	19	6	44
Richmond	3	2	19	8	32
Scarborough	6	2	30	8	46
Thornaby	5	1	12	4	22
Whitby	3	2	8	4	17
York	9	2	6	4	21

School Psychological Service

In the course of their work in schools and with handicapped children, the educational psychologists dealt with 144 boys and 72 girls. The age range was from toddlers to youths who had already left school and were in need of vocational guidance; the bulk, of course, were school children, and every type of school was represented.

Advice was given to teachers and parents about children with particular learning difficulties, and severe cases were given remedial help at the nearest clinic. With these, as with many other educational problems, the social worker's contribution in case-work was invaluable.

On 31.12.65 the waiting list comprised 28 boys and 10 girls.

At the request of the Chief Education Officer surveys were made in five county modern schools preparatory to the establishment of special classes.

New cases registered in 1965: 221 boys and 108 girls	....	329
Total seen by psychiatrist	....	200
Total seen by educational psychologist and P.S.W.	....	20
Total seen by educational psychologist only	....	216
Total seen by P.S.W. only	....	35

SCHOOL DENTAL SERVICE

Report by Mr. I. J. Faulds, Principal School Dental Officer

This year has seen many changes in staff and disappointment at the failure to begin building the new clinic at Northallerton. Three full-time dental officers and one part-time officer resigned during the year. Fortunately we were able to recruit Mr. Ash at Eastfield, and Miss Rose at Richmond. I hope their stay with us will be long. Mrs. Arthur and Mr. Downes joined the staff in a part-time capacity.

At the beginning of the year the Ministry of Health introduced a new set of returns for the Local Authority's School Dental Service. This entailed the printing of new statistical records, daily, monthly and annual, which caused many changes and has made comparison with previous years somewhat difficult. These changes were well received by the staff and in a short time welcomed by both dental officers and attendants. I am grateful to them for the helpful way our difficulties were overcome. The most obvious change is that now the returns of the work done are kept under age group headings, a change that brings the School Dental Service into line with the National Health Service. Part IV, on page 40 shows the new lay-out of the returns provided for the Ministry at the end of the year. It is obvious that comparison, column by column, with last year's returns is impossible.

There was a slight increase in the amount of conservation work done and the number of general anaesthetics given for the purpose of extractions were fewer as were the number of teeth extracted. More crowns and gold inlays were made for school children and I note gratefully a decrease in the number of dentures supplied. There was an increase of ten per cent in the amount of orthodontic work undertaken. I am glad to report that the number of cases discontinued because of lack of co-operation by patients or parents is as low as we have ever experienced in spite of the increased number of patients treated.

At the beginning of October a letter was received from the Department of Education and Science on the report made by Mr. J. G. Potter after his visit on July 5th—8th to review the North Riding County Council Dental Service. This report begins "I am to commend the Authority on the high standard of its dental services. The staff have done well to treat 22% of the school population and the ratio of permanent teeth filled to extracted is good. The output of work is slightly above average and the amount of orthodontic work undertaken is particularly good". Reference is made to the proposed regrading of the staff structure with approval. This proposal has now been implemented.

The report goes on to encourage the Authority to give more time to Dental Health Education and suggests that the co-operation of medical officers, health visitors and school teachers should be sought for this purpose. Many talks in schools are now given by our two dental auxiliaries, though these talks tend to be limited to schools near the clinics in which they work.

So much emphasis is placed by the Ministry on Dental Health Education that provision is now made on the Annual Return showing the

number of sessions spent on Dental Health Education. In some parts of the country Dental Health Weeks have been tried as a means of propaganda, with varying success. I am convinced that the best results can be obtained by constant pressure by all concerned—medical officers, dental officers, dental auxiliaries, health visitors, teachers and by school meals organisers.

Some criticism is made in the report on the state of decoration in some of our clinics, though the equipment is stated to be 'generally satisfactory in range and standard'.

The provision of tooth brushes for children who have meals at special schools has proved beneficial and I am grateful to the Head Teachers who have co-operated so willingly in adding one more duty to their already heavy load.

Again I wish to thank the dental staff for their support during the year and to acknowledge the willing co-operation of Head Teachers and their staff.

HANDICAPPED PUPILS

Under Section 34 of the Education Act, 1944, Education Authorities have a duty to ascertain and place handicapped pupils.

It is not invariably possible to find immediate vacancies in suitable schools for children requiring special education. Nevertheless, a further reduction of the waiting lists took place and on 20th January, 1966, 80 children required places in special schools compared with 89 the year previously.

Of the 80 children, 66 were classed as "educationally subnormal" (E.S.N.) and of these, 15 were awaiting residential and 51 day accommodation. Twenty of these awaiting day places were receiving special teaching in a separate building which, although not a "special school", serves only pupils who are appreciably retarded. There was therefore an aggregate of 46 children who were not receiving the type of education deemed necessary to match their aptitudes and abilities. The parents of 21 of these children had declined the places offered to them. Therefore, 25 children, 8 awaiting boarding and 17 awaiting day accommodation, were not admitted to special schools because places were not available.

Of those 14 children whose handicaps were not educational subnormality and who required education in special schools, 8 were children whose parents had refused places. It was not possible to obtain places for six children.

Some of those handicapped pupils for whom a suitable school cannot be arranged received tuition at home; others have continued in their ordinary schools while receiving as much special attention from their teachers as time has allowed.

The various categories of children requiring special educational treatment, as determined by the Handicapped Pupils and School Health Service Regulations, 1953, are given below and the figures, as are others in this report, are for the whole administrative county. The scheme of divisional administration provides that all children in the Scarborough division requiring special educational treatment shall be reported by the Divisional Executive to the County Council.

Blind Children

At the end of 1965, 8 children had been ascertained to be blind, that is, requiring education by methods not involving the use of sight.

During the year ten children attended the following schools:—

School	Boys	Girls
Henshaw's Blind School, Manchester	—	3
Royal Victoria Blind School, Newcastle-on-Tyne	3	1
Rushton Hall, Kettering	—	1
Sunshine Home, Leamington Spa	—	1
Conover Hall, Shrewsbury	—	1
Total	3	7

Partially Sighted Children

Children who had been ascertained as suffering from serious defects of vision but as being capable of receiving education by special methods involving the use of sight, numbered 12 in December, 1965.

The fourteen children attended special schools as shown:—

School	Boys	Girls
Northfield Road Day School, York	3	—
Exhall Grange, Coventry	3	2
Royal Victoria School for the Blind, Newcastle	—	1
Ysgol, Penybont, Glamorgan	1	—
Barclay School, Sunning Hill	—	3
Preston School for the Partially Sighted	1	—
Total	8	6

Deaf Children

At the end of the year 32 children were registered as deaf pupils, requiring educational methods suited to persons without naturally acquired speech; 30 were placed in suitable schools in January, 1966 (6 day, 24 boarding). Three new cases were ascertained during the year. A total of 34 children were accommodated in special schools in 1965 as below:—

School	Boys	Girls
Northern Counties School, Newcastle	2	2
Yorkshire School for the Deaf, Doncaster	12	7
St. John's School, Boston Spa	—	1
Middlesbrough Day School for the Deaf	2	6
Royal Residential Schools for the Deaf, Manchester	1	1
Total	17	17

Partially Hearing Children

Seventeen children were ascertained as having seriously impaired hearing, 16 of whom were at special schools. During the year 17 children attended special schools as shown:—

School	Boys	Girls
Yorkshire School for the Deaf, Doncaster	3	2
St. John's School, Boston Spa	—	1
Middlesbrough Day School for the Deaf	3	6
Wilfred Pickles School, Duddington	1	—
Needwood School, Burton-on-Trent	—	1
Total	7	10

Delicate Children

In general children classed as “delicate” are those for whom special educational treatment would improve health and well-being, but whose disability is of a temporary nature. Three children were ascertained under this category in 1965, but 10, 8 in day and 2 in boarding schools, were on the registers in January, 1966. The following table includes admissions to and discharges from schools during 1965:—

School	Boys	Girls
Northfield Day Open-Air School, York	4	2
St. Vincent's School, St. Leonards-on-Sea	—	2
Windlestone Hall School, Rushyford	1	—
Ragworth Open-Air School, Stockton	1	1
Total	6	5

EDUCATIONALLY SUBNORMAL CHILDREN

Of those children who are educationally subnormal, only a minority require education in a special school. Education in ordinary schools using special methods allows children to be taught at a more modest pace and this meets the needs of most cases. When a special school is required, a few children are best placed in residential schools.

At the end of 1965, 200 day places were available for educationally subnormal children. These were evenly divided between Eston Lowfields and Kirkleatham Hall School with a further 94 residential places at Brompton Hall School, near Scarborough. The provision of a further 50 day and 50 residential places at a new school in Scarborough was in prospect during 1966, and this, with the provision of further special classes in ordinary schools, should eliminate waiting lists and perhaps reduce the age of entry to special education.

In 1965, 45 boys and 17 girls were formally ascertained as being educationally subnormal and a considerably larger number was examined where subnormality was suspected.

At the end of January, 1966, 304 children (308 in January, 1965), comprising 102 boarders, 202 day pupils: (110 boarders, 198 day pupils in January, 1965), were receiving educational treatment otherwise than in special classes in ordinary schools and 66 (78 in the previous year) were awaiting places in special schools (see page 22 under “Handicapped Children”). In all 361 North Riding children attended special schools at some time or another during 1965, as follows:—

School	Boys	Girls
Brompton Hall	65	35
Kirkleatham Hall, Redcar	55	48
Lowfields School, Eston	72	55
Aldwark Manor, Aldwark	3	—
Besford Court, Worcester	1	—
Eden Grove, Bolton	1	—
Fulford Road Special Day School, York	6	6
Allerton Priory R.C. School, Woolton	—	3
Pontville R.C. School, Ormskirk	2	—
Hilton Grange School, Leeds	2	—
Spring Hill Road, Ripon	1	1
Crowthorn School, Edgworth	1	—
Camphill School, Aberdeen	1	—
Stanmore House, Lanark	1	—
Springfield School, Horsforth	1	—
Hindley Hall, Stocksfield	1	—
Total	213	148

Special Schools for Educationally Subnormal Children

As stated above, at the end of 1965, the authority had 3 special schools for educationally subnormal children, one residential of 94 places and two day schools of 100 places each. There was greater provision for boys than for girls in all three schools. The teaching staffs have special experience of teaching children of this group who receive their education in small specially selected classes. This careful selection of children eliminates the main cause of frustration for children with this particular handicap—hopeless competition with much brighter children.

Routine medical and dental inspections are performed at the schools and the children at the residential school are examined medically before going home on holiday as well as on their return. The educational psychologists are in close touch with the schools; they advise on educational matters as well as assisting the school medical staff in the selection of children for admission. Ancillary services, e.g. physiotherapy, speech therapy, etc. are given as and when necessary and available.

Residential Special School—Brompton Hall

Mr. K. G. Barker, Headmaster, has kindly supplied the following report:—

During the year 23 children were admitted to the school, all of whom were resident in the North Riding and had been attending schools of the North Riding Education Committee. Twenty-three children left the school during the year as under:—

On attaining leaving age	....	....	16
On parents moving to other areas		....	3
Excluded under Section 57	....	....	1
Transferred to Day Special Schools		....	3

Of the 16 who left on attaining age limit, 14 found employment; one has not yet found employment, and one is awaiting admission to Claypenny Hospital training unit.

The number of children on roll at the end of the year was 87 (54 boys and 33 girls) all of whom were resident.

Routine medical and dental treatment was given by the School Medical and Dental Services, and “family” medical attention was given by the local medical practitioner, with whom all the children were registered.

Day Special Schools

Eston Lowfields

Mr. J. E. Banfield, Headmaster, has kindly supplied the following report:—

The maximum number on roll has been increased to 105 during the year. This has resulted in a shortening of the waiting list for places in the School.

A Parents’ Association has been established recently.

The normal work of the School has been carried on by a full team of experienced teachers.

Kirkleatham Hall

Mr. K. G. Henson, Headmaster, has kindly supplied the following report:—

The school has places for 100 children aged 7 to 16 from a catchment area extending from Lazenby to Hinderwell.

During the year, 14 children attained the normal leaving age of 16, 2 children were deascertained and left school at the age of 15, 1 child left under Section 57 of the 1944 Education Act and 2 children left the district. Employment was available for most of the 15 and 16 year old leavers, a vast improvement on the previous two years.

There were 12 new entrants, including 1 girl (not included above) who left in April and was re-admitted in September. The number on roll decreased to 85 by December, 1965.

A pleasing feature has been the appointment of a speech therapist for the area who visits the school for one half-day a week.

I am most grateful for the continued help and co-operation of school medical officers and educational psychologists.

Epileptic Children

Two North Riding pupils were in special schools for epileptics in January, 1965. Altogether 4 children attended the following schools during the year:—

School				Boys	Girls
Sedgwick House School	....	....	....	3	—
Northfield Day School, York	....	....	....	—	1
Total				3	1

Maladjusted Children

Children requiring special educational treatment on account of emotional instability or psychological disturbance numbered 16 in January, 1966. Eight were in special boarding schools, three in boarding homes and four were receiving home tuition.

Placements for maladjusted children require particularly careful selection and must be matched to the needs, background and ability of each individual. Vacancies in special boarding schools are often very difficult to obtain. 15 children attended boarding schools or homes for some period during this year as follows:—

School				Boys	Girls
St. Hilliard's School, Mickleton	....	....	....	1	—
Fyling Hall School, Robin Hood's Bay	....	....	....	2	—
Friends' School, Great Ayton	....	....	....	1	—
William Henry Smith School, Boothroyd	....	....	....	2	—
Larches House School, Preston	....	....	....	3	—
Chaugeley School, Thelwall	....	....	....	1	—
St. Joseph's School, East Finchley	....	....	....	—	1
Wellesley Home, Windsor	....	....	....	—	1
St. Peter's School, Horbury	....	....	....	—	1
Nortonthorpe Hall, Scissett	....	....	....	1	—
Bodenham Manor, Hereford	....	....	....	1	—
Total				12	3

Physically Handicapped Children

Eleven boys and five girls were ascertained in 1965 as being physically handicapped and requiring admission to a special school. In January, 1966, 71 children were on the registers, 56 of them being accommodated in special schools and fifteen receiving home tuition.

During the year 71 children attended either day or residential schools as follows:—

School						Boys	Girls
Welburn Hall	....	....	....	....	....	31	26
West Mount, Ripon	....	....	....	....	....	1	—
Holly Bank School, Huddersfield			....	....	....	—	1
Lord Mayor Treloar, Froyle	....	....	....	....	....	1	—
Cropwood Open-Air School, Worcester			....	....	....	—	1
Ragworth Open-Air School, Stockton			....	....	....	1	—
Northfield Day Open-Air School, York			....	....	....	3	5
Irton Hall, Holmrook	....	....	....	....	....	—	1
Total						37	34

Welburn Hall Special School

Welburn Hall, the authority’s residential school for physically handicapped children has continued to benefit this and other authorities. There are 80 places at the school and all, or nearly all, are normally occupied. On 1.12.65 there were resident 81 children, 33 from the North Riding and 48 from elsewhere.

The apparent discrepancy between the numbers of children registered and the number of places can be explained by the absence of several children for lengthy periods in hospitals.

The following table classifies broadly into groups according to age and disability all children resident during the year under review.

Welburn Hall, Defects of Children Attending, 1965

Age Range	Orthopaedic Conditions								Medical Conditions					
	Polio-myelitis paralytic		Cere-bral Palsy		Muscu-lar Diseases		Other Con- ditions		Heart		Chest		Other Con- ditions	
	B	G	B	G	B	G	B	G	B	G	B	G	B	G
5—9	2	1	1	1	—	1	4	3	—	1	2	—	2	2
10—18	3	8	6	7	4	1	13	3	5	3	7	6	4	3
Total	5	9	7	8	4	2	17	6	5	4	9	6	6	5

General medical supervision of the children at Welburn is carried out by Dr. T. K. Cooke of Kirkbymoorside and orthopaedic supervision by the surgeons at the Adela Shaw Orthopaedic Hospital where children requiring hospital orthopaedic treatment are admitted. Physiotherapy and speech therapy are provided at the school.

Mr. Hywell Williams, Headmaster, has kindly supplied the following report:—

The approach to a normal school interpretation of physical education continues. Five boys were successful in obtaining the Duke of Edinburgh's Bronze Award. This entailed a 15 mile expedition and an overnight camp, both of which were undertaken by boys using wheel chairs and crutches. One boy (an asthmatic), successfully completed the Lyke Wake Walk (40 miles over high moor and rough country) in 12 hrs. 55 mins. An average time for a first crossing is about 16 hrs. Some 70% of the children can now swim, and this number includes a number of children with severe orthopaedic handicaps.

The physiotherapy department is well equipped, and this aspect of physical re-education continues to be in the care of a full-time physio-therapist. Good team work between the therapist and P.E. specialist is proving effective.

SECTION 57, EDUCATION ACT, 1944

Children reported under Section 57 (4) (as amended) as being “unsuitable for education within the school system” numbered 22 in 1965. In addition the local health authority was notified of 26 children who were “deemed to be in need of care or guidance after leaving school”.

In 1964, 22 and 41 children respectively were notified under these provisions.

The provisions of Section 57 A were invoked in five cases during the year and this decision was cancelled under Section 57A (2) of the Act. All five children were still deemed to be unsuitable for education at school.

INFECTIOUS DISEASE

Corrected notifications of infectious disease occurring during the year in North Riding children aged 5-14 years (inclusive) were as follows:—

Scarlet Fever	....	....	93
Whooping Cough	....	....	24
Poliomyelitis—Paralytic	....	....	—
Non-Paralytic	....	....	—
Measles	....	....	2,075
Diphtheria	....	....	—
Dysentery	....	....	16
Meningoccol Infection	....	....	1
Acute Pneumonia	....	....	2
Paratyphoid Fever	....	....	—
Food Poisoning	....	....	169
Tuberculosis—Respiratory	....	....	10
Other	....	....	2
Acute Encephalitis—Infections	....	....	—
Post Infections	....	....	—

Diphtheria and poliomyelitis notifications were again absent and this satisfactory position has been achieved by specific immunisation against both of these diseases. There was a welcome fall in the number of cases of whooping cough and it is to be hoped that this trend will continue.

Nevertheless, the levels of immunisation in the child population was still not sufficiently high and too many children are unprotected. A single case or carrier of diphtheria or poliomyelitis could easily start a major outbreak and the medical and nursing staff continued to impress on parents the necessity of having their children immunised against these disabling, and perhaps, fatal diseases.

Towards the end of 1965 the County Council decided to centralise the vaccination and immunisation recording system, using the computer at County Hall. This should improve the accuracy of records and facilitate the issue of reminders.

An Outbreak of Food Poisoning

On 17th June, an outbreak of food poisoning occurred at two Thornaby infants' and junior schools. Of 382 persons who had eaten the school dinner which was prepared in the Infants' school kitchen, 163 children, two teachers and 5 kitchen staff developed symptoms of food poisoning in varying degrees. Forty-three children were admitted to hospital but all were discharged within three days.

The outbreak was thoroughly investigated and the food, premises and staff were examined. The organism *staphylococcus aureus* which is capable of producing a powerful food poisoning toxin was isolated. This organism is commonly found in infected wounds, abscesses and other septic lesions and in this instance it was considered that the source of infection was the finger of a member of the staff who did not realise that it was potentially dangerous. The source of the food was completely exonerated from blame.

After thorough cleansing of the premises and equipment and medical examination of the food handling staff, the kitchen re-opened on June 21st.

Nephritis and Streptococcal Infection

Although not a legally notifiable disease, three cases of acute nephritis in school children came to light. Nephritis (inflammation of the kidneys) is not infrequently associated with the presence of an organism—*streptococcus pyogenes* type 12—in the nose and/or throat and this infection frequently occurs alone, giving no sign of illness.

In the three schools concerned children and staff who had been in close proximity to the nephritis patients were examined and swabs from nose and throat were sent to the Public Health Laboratory. Type 12 streptococci were found to be present in the nose and/or throat of several child contacts associated with each case of nephritis. These children were excluded from school while being treated with antibiotics and no further cases of nephritis were reported.

For his help in obtaining and examining the swabs, I am most grateful to Dr. J. G. Wallace, Director of the Public Health Laboratory at Northallerton.

SCHOOL MEALS

A sample showed that on one day in 1965, 44,682 pupils were taking school meals. The table below illustrates the results of similar samples during the past 10 years. The proportions of children under each heading are expressed as a percentage of the respective school population.

Year	School population	School Meals					
		Free		For payment		Total	%
		No.	%	No.	%		
1956	55,403	2,658	4.90	26,524	49.88	29,182	54.78
1957	55,838	2,586	4.63	24,613	44.08	27,199	48.71
1958	56,645	2,646	4.67	27,255	48.12	29,901	52.79
1959	57,682	2,995	5.19	29,066	50.39	32,061	55.58
1960	58,257	3,161	5.25	30,550	52.46	33,711	57.88
1961	58,656	3,033	5.19	31,714	52.38	34,747	57.36
1962	59,740	3,559	5.96	32,499	54.40	36,058	60.36
1963	61,373	4,237	6.90	34,056	55.49	38,293	62.39
1964	62,911	3,935	6.25	37,463	59.55	41,398	65.80
1965	65,049	3,852	5.92	40,830	62.76	44,682	68.68

For some time selected members of the school meals staff have received short training courses on clean food handling at Wrea Head. These courses play a very important part in the prevention of food poisoning and in the achievement of a high standard of feeding and kitchen practice. It was felt that the time had come to extend this training and towards the end of the year arrangements were being made to start local classes leading to the Certificate in Food Handling of the St. John's Ambulance Association.

As a further precaution against food poisoning, specimens of faeces are taken from all food handling staff, including new entrants, for the purpose of identifying any symptomless carriers of pathogenic organisms.

MILK IN SCHOOLS

Consumption of Milk

The table below shows the numbers and percentage of children taking milk at school, on sample days, in the years 1956-1965 inclusive:—

Year	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965
Taking Milk— No. of children	42,750	41,571	44,644	45,372	45,071	45,976	46,090	47,923	48,738	49,863
Proportion of the school population	79.15	74.45	78.81	78.66	77.37	78.38	77.15	78.08	77.47	76.65

Grades of Milk

The numbers of schools receiving the various types of milk supply, in the years 1958—1965, are as follows:—

		1958	1959	1960	1961	1962	1963	1964	1965
Pasteurised Milk	....	343	341	350	338	331	327	341	348
Tuberculin Tested/Untreated Milk	....	49	50	45	56	53	48	39	32
Non-designated Milk	....	17	13	4	1	—	—	—	—
Dried Milk	....	6	4	4	2	1	3	2	2

The figures for 1965 include the four maintained special schools in the Riding, and 29 non-maintained schools. Of the latter, 28 schools received pasteurised milk, and 1 untreated milk.

Quality of Milk

School milk supplies have again been supervised by the county health inspectors who have taken 1,448 samples during visits to schools:—

Grade of Milk	Frequency of sampling	Frequency of Testing		
		Phosphatase	Methylene Blue	Biological
Untreated	six monthly	—	quarterly	six monthly
Pasteurised	.... quarterly	quarterly	quarterly	as required

The results of these tests and biological examinations were as follows:

Grade	No. taken	Methylene Blue Test		Phosphatase test		Biological examination		Brucella abortus	
		Passed	Failed	Passed	Failed	Tb. Neg.	Tb. Pos.	Neg.	Pos.
Pasteurised	.... 1,299	1,175	40	1,289	3	3	—	3	—
Untreated	.... 149	115	19	—	—	90	—	87	2

It will be observed that only 3 of 1,292 samples (1 of 1,329 in 1964) failed to pass the phosphatase test. The milk which failed the phosphatase test was produced at pasteurising plants situated outside the North Riding; details were passed to the respective licensing authorities for investigation.

PHYSICAL EDUCATION

I am indebted to the Chief Education Officer for the following report.

The expansion in the scope of physical education continued with the building of more new schools and the improvement where possible of facilities at older primary schools. Work in schools, at all levels, improved in content and performance; schemes of work being based on the interests and capabilities of the children rather than on any particular 'system' of physical education. The staffing position as regards specialist teachers of physical education continued to be satisfactory and it was possible to second experienced men teachers to full-time courses of further training at Physical Education Colleges.

Visits to schools were made by advanced course students and overseas students from the Carnegie College of Physical Education and students from the North Riding College of Education have observed work in the Primary Schools of the Scarborough Division. North Riding schools were widely used for school practice purposes by Colleges of Education.

Short Courses for teachers provided by the Education Committee continued to be well supported. The biennial Easter Course, held at the North Riding College of Education, was attended by 53 resident and 59 non-resident students; many aspects of Physical Education were covered and it was particularly pleasing that the sessions on Canoe Building and Expedition Training were attended by teachers of other subjects as well as by physical education specialists. Residential courses in English Folk Dancing, Scottish Dancing, Cricket Coaching and Tennis were provided at Wrea Head College and local courses in swimming, taken by a National Coach, were held at Thornaby and Eston.

The Authority's Cricket Coaching Scheme for the Grammar Schools was extended to cover some boys' secondary modern schools. The swimming facilities available to schools were fully used and the conversion of the Yearsley Pool, New Earswick, to an indoor pool has provided opportunity for swimming throughout the year for school children in the Flaxton area.

The North Riding Schools Athletic Union was again very active in all its sections. Yorkshire colours were gained by individuals in athletics, association football, boxing, cricket, cross-country running and hockey. In the All-England Athletics Championships the Junior Mile event was won by a North Riding boy and another boy won a North of England Championship in boxing. Nearly all this work is "extra curriculum" and is additional to the already large and comprehensive programme of inter-school matches and activities of all kinds. An example of the type of work was the gaining of the Runners'-up position in the National Schools' Judo Competition by the Lady Lumley's School team. In the outdoor activities section many schools are following the Duke of Edinburgh's Award Scheme.

The Education Committee's camp site at Low Dalby was well booked during the summer. The trend now is for schools to carry out their own

individual camps using lightweight equipment on sites outside the Riding and in some cases on the Continent. The Danby Fryup Expedition Centre has been much appreciated and well used by schools for adventure training and for a wide range of countryside activities. The Residential Field Studies Centre at East Barnby, nr. Whitby was brought into use at the end of the year and will provide further opportunity for schools for outdoor pursuits.

To summarise, a comprehensive programme of Physical Education was carried out as part of the curriculum, and outside it, and the efforts and enthusiasm of schools and teachers in this work is much appreciated.

NURSERY SCHOOLS

The Committee has the responsibility of maintaining a 45-place nursery school at Scarborough and for nursery classes attached to the following schools:—

South Bank, Cromwell Road Infants
South Bank, Princess Street Infants
South Bank, R.C. Infant
Scarborough, Friarage Infant
Marske, Errington County Infant

The class at Marske consists of 20 places which are filled and is intended for the children of married women returning to the teaching profession.

OTHER MEDICAL EXAMINATIONS

(a) Employment of School Children

During the year there was an increase in the numbers examined. 894 children were medically examined under the provisions of the bye-laws relating to the employment of children between 13 years and school leaving age, all but one of whom were found to be fit for employment without detriment to their health. In addition 28 children were examined in connection with their proposed employment in entertainments.

(b) Medical Examination of entrants to the teaching profession.

The procedure adopted as from the 1st April, 1952 was continued, X-ray examination being used in all cases. During 1965, 154 male and 322 female candidates were examined by the school medical officers.

The comparable figures for 1964 were 116 male and 244 female entrants.

(c) Superannuation medical examinations

The medical staff of the school health service examined in 1965, 754 candidates for superannuable appointment to the staff of the education authority.

SCHOOL ENVIRONMENTAL HYGIENE

The county health inspectors, when visiting schools for milk sampling purposes, write comments in the school log books on any sanitary matters relevant to individual schools. The number of rural schools concerning which recommendations with regard to the boiling of drinking water were operative during the four quarters of the year were as follows:—

1965	1st quarter	2nd Quarter	3rd Quarter	4th Quarter
No. of Schools	4	5	12	10

The county health inspectors also give advice on hygiene in school meals premises, noting any structural defects in the school log book. During the year 438 visits were made for this purpose.

Swimming baths at schools and at the North Riding Training College were regularly inspected. Fifty-three samples of water were taken for bacteriological examination; each being checked also for pH value and chlorine residual. In the three cases where the samples were unsatisfactory, remedial advice was given. Recommendations were also made relevant to the construction of new pools.

MEDICAL INSPECTION AND TREATMENT

PART I.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

Table A—Periodic Medical Inspections

Age Groups Inspected (by year of birth)	No. of pupils who have received a full medical examination	Physical condition of pupils inspected		Pupils found to require treatment (excluding Dental diseases and infestation with vermin)		
		Satisfactory	Unsatisfactory	For Defective vision (Excluding squint)	For any other condition recorded at Part II	Total individual pupils
		No. (3)	No. (4)	(5)	(6)	(7)
1961 and later	90	89	1	—	13	13
1960	1,929	1,928	1	47	240	284
1959	3,445	3,443	2	83	303	379
1958	1,533	1,529	4	53	114	163
1957	2,246	2,244	2	91	187	273
1956	1,537	1,536	1	89	82	165
1955	904	898	6	70	75	136
1954	1,818	1,812	6	147	136	274
1953	2,423	2,417	6	204	173	361
1952	1,267	1,263	4	115	108	217
1951	1,370	1,370	—	134	97	220
1950 & earlier	3,572	3,565	7	346	255	574
Total	22,134	22,094	40	1,379	1,783	3,059

Col. (3)—Total as a percentage of Col. (2) TOTAL 99.82%

Col. (4)—Total as a percentage of Col. (2) TOTAL .18%

Table B—Other Inspections	Number of Special Inspections	....	7,521
	Number of Re-inspections	....	7,114
	Total	....	14,635

Table C—Infestation with Vermin

(i) Total number of individual examinations of pupils in schools by the school nurses or other authorised persons	....	133,741
(ii) Total number of individual pupils found to be infested	....	1,801
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	....	5
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3) Education Act, 1944)	....	—

PART II

Defects found by Medical Inspection during the year

Periodic Inspections

Defect or Disease	PERIODIC INSPECTIONS (T—Requiring treatment. O—Requiring observation)							
	Entrants		Leavers		Others		Total	
	T	O	T	O	T	O	T	O
Skin	51	43	92	10	144	59	287	112
Eyes—								
(a) Vision	130	277	480	237	769	385	1,379	899
(b) Squint	131	26	22	7	107	37	260	70
(c) Other	7	6	4	3	19	11	30	20
Ears—								
(a) Hearing	32	31	5	14	44	49	81	94
(b) Otitis Media	18	18	6	7	13	16	37	41
(c) Other	7	6	5	1	15	6	27	13
Nose or Throat	78	137	10	15	82	109	170	261
Speech	59	69	3	4	25	25	87	98
Lymphatic Glands	3	22	—	1	3	11	6	34
Heart	11	26	8	23	21	50	40	99
Lungs	24	74	9	13	29	88	62	175
Developmental —								
(a) Hernia	6	8	—	1	5	6	11	15
(b) Other	18	25	20	21	60	52	98	98
Orthopaedic—								
(a) Posture	9	9	8	21	17	29	34	59
(b) Feet	57	37	33	38	89	76	179	151
(c) Other	14	45	11	18	30	51	55	114
Nervous System—								
(a) Epilepsy	6	2	10	1	16	9	32	12
(b) Other	4	5	3	5	15	16	22	26
Psychological—								
(a) Developmental	13	22	92	26	94	79	199	127
(b) Stability	10	51	3	24	22	84	35	159
Abdomen	7	7	4	4	15	22	26	33
Other	24	17	25	12	34	52	83	81

Special Inspections

Defect or Disease	SPECIAL INSPECTIONS	
	Requiring treatment	Requiring observation
Skin	118	6
Eyes—		
(a) Vision	2,276	234
(b) Squint	368	17
(c) Other	25	2
Ears—		
(a) Hearing	260	42
(b) Otitis Media	1	—
(c) Other	9	5
Nose or Throat	11	8
Speech	9	5
Lymphatic Glands	—	—
Heart	2	6
Lungs	7	3
Developmental—		
(a) Hernia	1	1
(b) Other	5	4
Orthopaedic—		
(a) Posture	101	1
(b) Feet	902	8
(c) Other	295	—
Nervous system—		
(a) Epilepsy	1	—
(b) Other	6	6
Psychological		
(a) Developmental	214	8
(b) Stability	186	5
Abdomen	—	1
Other	216	25

PART III

Treatment of Pupils attending Maintained and Secondary Schools.
(Including Nursery and Special Schools)

TABLE A. EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	31
Errors of refraction (including squint)	3,034
Total	3,065
Number of pupils for whom spectacles were prescribed	2,421

TABLE B. DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

	Number of cases known to have been treated
Received operative treatment	
(a) for diseases of the ear	19
(b) for adenoids and chronic tonsillitis	341
(c) for other nose and throat conditions	48
Received other forms of treatment	258
Total	666

Total No. of pupils in school who are known to have been provided	
with hearing aids (a) in 1965	14
(b) in previous years	42

TABLE C. ORTHOPAEDIC AND POSTURAL DEFECTS.

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patient Departments	1,251
(b) Pupils treated at school for Postural Defects	33
Total	1,284

TABLE D. DISEASES OF THE SKIN (excluding uncleanliness for which see Table C of Part I)

	Number of cases known to have been treated
Ringworm— (i) Scalp	1
(ii) Body	—
Scabies	1
Impetigo	3
Other skin diseases	363
Total	368

TABLE E. CHILD GUIDANCE TREATMENT.

Pupils treated at Child Guidance Clinics	235
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TABLE F. SPEECH THERAPY

Pupils treated by Speech Therapist	526
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TABLE G. OTHER TREATMENT GIVEN

Pupils with minor ailments	618
Pupils who received B.C.G. vaccination (by chest physicians)	113

PART IV

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

Attendances and Treatment				Ages 5 to 9	Ages 10 to 14	Ages 15 & over	Total
First Visit	....	....	....	7197	5858	1029	14084
Subsequent visits	....	....	....	6166	9290	1672	17128
Total visits	....	....	....	13363	15148	2701	31212
Additional courses of treatment commenced				....	....	....	....
	....	....	....	455	386	71	912
Fillings in permanent teeth	....	....	....	6264	13181	2967	22412
Fillings in deciduous teeth	....	....	....	5057	424		5481
Permanent teeth filled	....	....	....	5171	11579	2648	19398
Deciduous teeth filled	....	....	....	4658	385		5043
Permanent teeth extracted	....	....	....	618	2040	389	3047
Deciduous teeth extracted	....	....	....	8364	1953		10317
General anaesthetics	....	....	....	3048	1387	123	4558
Emergencies	....	....	....	437	254	73	764

Number of pupils X-rayed	....	546
Prophylaxis	....	2024
Teeth otherwise conserved	....	2606
Number of teeth root filled	....	36
Inlays	....	38
Crowns	....	16
Courses of treatment completed	....	12170

Orthodontics

Cases remaining from previous year	....	232
New cases commenced during year	....	278
Cases completed during year	....	160
Cases discontinued during year	....	29
No. of removable appliances fitted	....	539
No. of fixed appliances fitted	....	1
Pupils referred to Hospital consultant	....	10

Prosthetics

	5 to 9	10 to 14	15 & over	Total
Pupils supplied with F.U. or F.L. (first time)	.... —	4	2	6
Pupils supplied with other dentures (first time)	.... 5	63	42	110
Number of dentures supplied	.... 7	84	55	146

Anaesthetics

General Anaesthetics administered by Dental Officers	95
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Inspections

(a)	First inspection at school	Number of pupils	48492
(b)	First inspection at clinic.	Number of pupils	1313
	Number of (a) + (b) found to require treatment		....	29518
	Number of (a) + (b) offered treatment		....	24511
(c)	Pupils re-inspected at school clinic	....	....	4852
	Number of (c) found to require treatment		....	2467

Sessions

Sessions devoted to treatment		4842
Sessions devoted to inspection		....	460
Sessions devoted to Dental Health			
	Education	....	71

Minor Ailments

CLINIC SERVICES

CLINIC	LOCATION	SESSIONS
Thornaby	.... School Clinic, George Street	.... Tuesday, Friday 9 a.m.
South Bank	.... Albert House, Normanby Road	Monday, Friday 9-30 a.m.
Grangetown	.... Broadway	.... Tuesday, Friday 9-30 a.m.
Grangetown	.... Alderman Wm. Jones County School	.... Monday 9-30 a.m.
Eston	.... Health Clinic, Fabian Road	Friday, 9-30 a.m.
Redcar	.... 5, Turner Street, Coatham	.... Monday, Friday 9-30 a.m.
Saltburn	.... The Clinic, Bath Street	.... Wednesday, 9-30 a.m.
Guisborough	.... Health Clinic, Park Lane	.... Friday 9 a.m.
Lingdale	.... School Clinic, High Street	.... Wednesday 9-30 a.m.
Whitby	.... School Clinic, Grape Lane	.... Monday, Friday 9 a.m.
Whitby	.... East Whitby School	.... Wednesday 10 a.m.
Clifton	.... Clifton Without Jnr. School	.... Tuesday, Friday 10 a.m.
New Earswick	.... Joseph Rowntree C.M. School	.... Tuesday, Friday 10 a.m.
Scarborough	.... Northway Clinic	.... Monday-Saturday 9 a.m.
Scarborough	.... Northstead School	.... Wednesday 9-30 a.m.
Scarborough	.... Hinderwell School	.... Thursday 9-30 a.m.
Scarborough	.... Westway, Eastfield	.... Wednesday 9-30 a.m.
Scarborough	.... Raincliffe School	.... Wednesday 10 a.m.
Pickering	.... Health Clinic, Train Lane	.... Monday to Friday 9 a.m.
Loftus	.... Hall Grounds	.... Friday 10 a.m. (fortnightly)
Brotton	.... County Modern School	.... Wednesday 11 a.m.

Orthopaedic Clinics

Thornaby	.... School Clinic, George Street	.... Tuesday, Friday 2 p.m.
South Bank	.... Albert House, Normanby Road	Tuesday, Friday 10-30 a.m.
Normanby	.... The Clinic, Windsor Road	.... Friday 9-30 a.m.
Redcar	.... 5, Turner Street, Coatham	.... Thursday, 10-30 a.m.
Loftus	.... Hall Grounds	.... 1st Wednesday monthly, 10-30 a.m. Alternate Mondays, 10 a.m.
Guisborough	.... Health Clinic, Park Lane	.... Monday 10-30 a.m.
Whitby	.... School Clinic, Grape Lane	.... 1st Wednesday monthly, 2 p.m. Alternate Mondays 2 p.m.
Kirkbymoorside	.... Adela Shaw Orthopaedic Hospital	3rd Wednesday in each alternate month 2 p.m.
Malton	.... Health Clinic, Princess Road	.... 3rd Wednesday in each alternate month 2 p.m.
Pickering	.... Health Clinic, Train Lane	.... 2nd Friday in each alternate month, 2-30 p.m.
Thirsk	.... Health Clinic, Little Green	.... 4th Wednesday in each alternate month 10-30 a.m.
York	.... The School Clinic, Monkgate	2nd Wednesday monthly 2 p.m.
Northallerton	.... Zetland Street Clinic	.... 4th Wednesday in each alternate month 10-30 a.m.
Richmond	.... Health Clinic, Quaker Lane	.... 4th Saturday in each month 10-30 a.m.
Scarborough	.... Northway Clinic	.... Tuesday, Friday 9 a.m.
Scarborough	.... Westway, Eastfield	.... Thursday monthly, 2 p.m.

Speech Therapy Clinics

CLINIC	LOCATION	SESSIONS
Malton	.... Health Clinic, Princess Road	.... Monday 2 p.m.
Pickering	.... Health Clinic, Train Lane	.... Monday 9-30 a.m.
Scarborough	Northway Clinic	.... By appointment
Easingwold	.... Grammar and Modern School	Tuesday 9-30 a.m.
Thirsk	.... Health Clinic, Little Green	.... Wednesday 9-30 a.m.
Northallerton	.... Zetland Street Clinic	.... Thursday 9-30 a.m.
South Bank	.... Lowfields School	.... Wednesday, monthly 9-30 a.m.
Eston	.... Health Clinic, Fabian Road	.... Tuesday
Thornaby	.... School Clinic, George Street	.... Monday, Wednesday 9-30 a.m.
Huntington	.... Health Clinic, Keith Avenue	.... Friday, 2 p.m.
Guisborough	.... Health Clinic, Park Lane	.... Tuesday 2 p.m. Wednesday 9-30 a.m.
Saltburn	.... The Clinic, Bath Street	.... Friday 9-30 a.m.
Brotton	.... County Modern School	.... Thursday, Friday, 2 p.m.
Whitby	.... School Clinic, Grape Lane	.... Monday, 9-30 a.m.
Redcar	.... 5, Turner Street	.... Tuesday, Thursday, 9-30 a.m.
Redcar	.... Kirkleatham Hall School	.... Wednesday, 2 p.m.

Ophthalmic Clinics

Thornaby	.... School Clinic, George Street	.... Thursday 1-45 p.m.
Eston	.... Health Clinic, Fabian Road	.... Tuesday 2 p.m.
Redcar	.... 5, Turner Street, Coatham	.... Friday 1-45 p.m.
Guisborough	.... Health Clinic, Park Lane	.... Monday 2 p.m.
Whitby	.... School Clinic, Grape Lane	.... As required
Northallerton	.... Zetland Street Clinic	.... Wednesday 10 a.m. (fort- nightly)
Richmond	.... Health Clinic, Quaker Lane	.... Wednesday 9-45 a.m. (fort- nightly)
Thirsk	.... Lambert Memorial Hospital	.... Saturday 9-45 a.m.
Malton	.... Health Clinic, Princess Road	
	Malton	.... As required
Kirkbymoorside	.... Adela Shaw Orthopaedic Hospital	,, ,,
Flaxton	.... County Hospital, York ,, ,,
Scarborough	.... Northway Clinic	.... Monday 10-30 a.m.
Pickering	.... Health Clinic, Train Lane	.... As required

Dental Clinics

Thornaby	.... School Clinic, George Street	.... As required
South Bank	.... Albert House, Normanby Road	,, ,,
Eston	.... Health Clinic, Fabian Road ,, ,,
Redcar	.... 5, Turner Street, Coatham ,, ,,
Saltburn	.... The Clinic, Bath Street ,, ,,
Guisborough	.... Health Clinic, Park Lane ,, ,,
Whitby	.... School Clinic, Grape Lane ,, ,,
Scarborough	.... Northway Clinic ,, ,,
Scarborough	.... West Way, Eastfield ,, ,,
New Earswick	.... Jos. Rowntree C.M. School ,, ,,

Dental Clinics—continued

CLINIC	LOCATION	SESSIONS
Northallerton	.... Zetland Street Clinic	.... As required
Richmond	.... Health Clinic, Quaker Lane „ „
Hipswell	.... Hipswell County Modern School „ „
Ryedale	.... Ryedale C.M. School, Nawton „ „
Pickering	.... Health Clinic, Train Lane „ „
Lingdale	.... School Clinic, High Street „ „
Easingwold	.... Easingwold Grammar/Modern School „ „
Thirsk	.... Health Clinic, Little Green „ „
Bedale	.... Bedale County Modern School „ „
Leyburn	.... Wensleydale County Modern School „ „
Clifton	.... Canon A. R. Lee County Modern School „ „
Brotton	.... Brotton County Modern School „ „
Loftus	.... Hall Grounds „ „
Malton	.... Health Clinic, Princess Road „ „

Ear, Nose and Throat Consultation Clinics

Thornaby	.... School Clinic, George Street	.... One Wednesday each month 11-0 a.m.
Normanby	.... The Clinic, Windsor Road „ „
Redcar	.... 5, Turner Street, Coatham „ „
Guisborough	.... Health Clinic, Park Lane „ „

Artificial Sunlight Clinics

Thornaby	.... Health Centre, Francis Street	Tuesday, Thursday 9-30 a.m.
Guisborough	.... Health Clinic, Park Lane	.... Friday 2 p.m.
Whitby	.... District Health Office, Grape Lane	.... Friday 9 a.m.
Richmond	.... Health Clinic, Quaker Lane	.... Tuesday, Friday weekly 9 a.m.
Scarborough	.... Medical Baths	.... Monday, Thursday Boys 9 a.m. Girls 9-30 a.m.

Remedial Exercise Clinic

Scarborough	.... Northway Clinic	.... Tuesday, Friday 9 a.m.
Scarborough	.... Westway, Eastfield	.... Thursday, 2 p.m.

Child Guidance Clinics

Clifton	.... 47 Clarence Street, York	Wednesday, fortnightly a.m.
Scarborough	.... Northway Clinic	.... Wednesday, Thursday, p.m.
Thornaby	.... Health Centre, Francis Street	Friday, a.m.
Redcar	.... 29 Queen Street	.... Wednesday, p.m.
Guisborough	.... Health Clinic, Park Lane	.... Friday, p.m.
Whitby	.... School Clinic, Grape Lane	.... Wednesday, a.m.
Richmond Health Clinic, Quaker Lane Monday

Paediatric Clinic

Scarborough Old Hospital, Friarsway As required
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